FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

• "PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

49.192

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DOCUMENT # F95000004225 (7)

| OMNI FINANCIAL SERVICES OF AMERICA, INC. | | | | | | |
|--|--|---------------------|---------------------------------------|---|--|--|
| Principal Place | of Business | Mailing Address | | i talbista stiff ifitti firet matte pater age | 11 AD111 62111 61614 11212 11261 9111 1161 | |
| 120 NW 12TH AVE DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 3 | | . 33442 | | | | |
| | | | | 3. Date Incorporated or Qualified 38/31/1995 | 3a. Date of Last Report | |
| 2. Principal Pla | upo of Riveinass | 2a. Mailing Address | | 4. FEI Number | Applied For | |
| z. Principa: Pia | ace of phantess | 26 | | 65-0593360 | Not Applicable | |
| Suite, Apt. # | t. etc. | Suite, Apt. #, etc. | | | \$8.75 Additional | |
| 22 | | 27 | | D. Certificate of Citatos Footing | Fee Required | |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May Be | |
| 23 | | 28 | | Trust Fortal Contained Con- | Added to rees | |
| Ζιρ | Country | Ziρ | Country | 8. This corporation has liability for inta | angible tax under s 199.032, No | |
| 24 | 25 | [29] | 30 | Florida Statutes Yes 10. Name and Address of New Reg | | |
| | 9. Name and Address of Currer | nt Hegistered Agent | 81 Name | To. Haite Bild Address of Hotel Hos | | |
| • | | | | | | |
| | RPORATION SYSTEM | | 82 Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| | OUTH PINE ISLAND ROAD | | 83 | | | |
| PLANTA | TION FL 33324 | | | | Tool 7 Code | |
| | | | 84 City | | FL 85 Zip Gode | |
| SIGNATURE | th, and accept the obligations of, Sec Signature, typed or proted nature of the affecting. OFFICERS AN | | VOT: Bugstered Apont signaturs resort | ADDITIONS/CHANGES TO OFFIC | | |
| TIFLE | D | ☐ DELETE | 1 1 1 ITUE S | in attached Rist | ☐ Change ☐ Addition | |
| NAME | BROWN, COLIN | | 1.2 NAME | er attached of | • | |
| STREET ADDRESS | 120 NW 12TH AVE | | 1.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | DEERFIELD BEACH FL 3344 | | 1,4 CiTy - ST - ZiF | | Change Addition | |
| TITLE | P | DELETE | 2 1 TITLE | | Change Addition | |
| NAME | NIXON, MICHAEL | | 22 NAME | | | |
| STREET ADDRESS | 120 NW 12TH AVE | •• | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | DEERFIELD BEACH FL 3344 | T DELETE | 2 4 CITY - ST - ZIP | | Change Addition | |
| THILE | S SOURI AND IOUNI I | □ procur | 3 2 NAME | | _ · _ | |
| NAME | WHELAN, JOHN J 120 NW 12TH AVE | | 3.3 STREET ADDRESS | | | |
| STREET ADDRESS | DEERFIELD BEACH FL 334 | 49 | 3.4 CHY+ST-ZIP | | | |
| CITY-ST-7IP TITLE | V | DELETE | 4. 1 TITLE | 400001 75 -03/25/96010 | Change Addition | |
| NAME | WILLOUGHBY, JAMES JR | _ | 4.2 NAME | -63725736010 | 120925 | |
| STREET ADDRESS | 6150 OMNI PARK DR | | 4.3 STREET ADDRESS | ***200.00 | | |
| CITY-ST-ZIP | MOBILE AL 36609 | | 4.4 CRY - ST - ZIP | | 5 0. 5 1 | |
| TITLE | | ☐ DELETE | 5 1 TITLE | | Change Addition | |
| NAME | | | 5 2 NAME | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 54 CITY - ST - ZIP | | Change Addition | |
| TITLE | | ☐ DELETE | 6 1 THLE | | ☐ onange ☐ Addition | |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | € 3 STREET ADDRESS | | | |

64.C [Y-ST-ZIP]

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attacymient with an address

SIGNATURE:

NATURE AND TYPED OR PONTED NAME OF SIGNING OFFICER OR DIS

Hrv/96 (904) 459-2010

CR2E034 (12/95)

Pg. 2 92

Rev: 2/14/96

OMNI FINANCIAL SERVICES OF AMERICA, INC.

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

TITLE

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NAME

ADDRESS

CITY, STATE ZIP CODE

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

P/D

Smith, Daryl P.

100 NW 12th Ave.

Deerfield Beach, FL 33442

S

Whelan, John J

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

D

Brown, Colin

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

V/T

Willoughby, James

1769 Paragon Drive

Memphis, TN 38132